2003	
FORM	
MO-PT	-6

Attachment Sequence No. 1040-07 and 1040P-01

	THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.				
NAME	LAST NAME FIRST NAME INITIAL BIRTHDATE 190	SO	CIAL SECURITY NO.		
	SPOUSE'S LAST NAME FIRST NAME INITIAL BIRTHDATE 191	SPO	DUSE'S SOCIAL SECURITY	NO.	
Ş	You must check a qualification to be eligible for a credit. Check only one. Copies of letters, for included with claim.	ms, e	etc., must be		
JALIFICA	192 A. 65 years of age or older (Attach a copy of Form SSA-1099.) 194 C. 100% Disabled (Attach a copy of Security Administration or Form SSA-1099.)	of to	he letter from Soc SSA-1099.)	cial	
	193 B. 100% Disabled Veteran (Attach a copy of the letter from Department of Veteran's Affairs.) 195 D. 60 years of age or older and recopy of Fo				
FII	LING STATUS 196 Single 197 Married — Filing Combined 198 Married — Living Separate for Entire Year	If m	narried filing combin	ed, omes.	
Failure to provide proper supporting documentation (lease agreement(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim! Items listed below in color MUST be attached to claim if that line has an amount entered on it.					
1	. Enter the amount of income from Form MO-1040, Line 6, OR Form MO-1040P, Line 4	1	199	00	
2	Enter the amount of social security benefits before any deductions and/or the amount of social security equivalent railroad retirement benefits. Attach Form SSA-1099 and/or RRB-1099	2	200	00	
3	Enter the total amount of pensions, annuities, dividends, or interest income not included in Line 1. Include tax exempt interest from Form MO-A, Part 1, Line 6 (if filing Form MO-1040). Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, etc.	3	201	00	
4	Enter the amount of railroad retirement benefits (not included in Line 2) before any deductions. Attach Form RRB/1099-R (Tier II). If filing Form MO-1040, refer to Form MO-A, Part 1, Line 8	4	202	00	
5	Enter the amount of veteran's payments or benefits before any deductions. Attach letter from Veteran's Affairs.	5	203	00	
6	Enter the total amount received by you and/or your minor children from: public relief, public assistance, SSI, child support, or Temporary Assistance (TA) payments. Attach letter from SSA, letter from Social Services, letter from DCSE, letter from DFS, if applicable.	6	204	00	
7	Enter the amount of nonbusiness loss(es). You must include nonbusiness losses in your household income here. (Include capital loss from Federal Form 1040, Line 13a.)	7	205	00	
8	TOTAL household income — Add Lines 1 through 7. Enter total here.	8	206	00	
9	Enter \$2,000 if you are married and filing a combined claim with your spouse. Otherwise, enter "0"	9	_ 207	00	
10	. Net household income — Subtract Line 9 from Line 8. If the total is over \$25,000, no credit or refund is allowed. Do not file this claim.	10	208	00	
11	. If you owned your home, enter the total amount of real estate tax that you paid for your home less special assessments. Attach a copy of PAID real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach Form 948, Assessor's Certification.	11	209	00	
12	If you rented your home, enter the amount from Form MO-CRP(s), Line 8 in the box to the right. (If total yearly rent is more than Line 8, attach rent payment explanation.) Attach lease agreement(s), rent receipt(s), or statement from landlord, along with Form MO-CRP.	12	211	00	
13	. Total tax and/or rent — Add Lines 11 and 12 and enter the total	13	212	00	
14	. Apply Lines 10 and 13 to the chart in the instructions to figure your Property Tax Credit. You must use the chart to see how much refund you are allowed. Enter this amount on Form MO-1040, Line 37 OR Form MO-1040P, Line 20.	14	213	00	
	THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-10	040P)_		